

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		05/03/00
O.I.P.E. CLASSIFIER		23	55.00
FORMALITY REVIEW	CT	69916	7/10/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

- | | | | |
|---|-------------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral)... Canceled | A | Appeal |
| + | Restricted | O | Objected |

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If more than 150 claims or 10 actions
staple additional sheet here

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